FD-759 (Rev. 5-25-95)

To: Director, FBI ( )
Attn: CID, __NIPC-CID__ Section

From: SAC, __CINCINNATI__ (200-CI-60562) (P)

Title: UNSUB(S);
WSAF
INSTITUTE OF TECHNOLOGY
HACKING ATTACK ON

| For FBI Field Office use only |
| CM#: |

Notification of SAC Authority Granted for Use of CONSENSUAL Monitoring Equipment
(Check **only** ONE)
☐ Routine Use
☐ Emergency Use-Sensitive Circumstances (cannot exceed 30 days & may be extended only by FBIHQ).

b7E

This form must be typewritten & submitted within 10 working days of the date authority is granted as shown in Item 5 below.

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1. Reason for Proposed Use: (Check)
☐ Corroborate Testimony
☐ Protect Consenting Party
☐ Protect Government Property
☑ Collect Evidence
☐ Other (Specify)_____

2. Type of Equipment: (Check)
☐ Transmitter/Receiver
☐ Concealed Recorder
☐ CCTV/Audio & Video
☐ CCTV Video only
☐ Microphone
☐ Telephone
☑ Other (Specify) __Network Monitor__

3. Consenting Party (Identify ONLY on Field Office Copy)
☑ Nonconfidential Party
☐ Confidential Source
☐ Cooperative Witness

4. Interceptee(s): (Include Title if Public Official)
Wright State University, College of Engineering & Computer Science
& others as yet unknown.

5. Duration of proposed use:
Authorized On: _____
☑ For the duration of investigation
☐ For 30 days (Emergency NTCM usage)
Expiring On: _____

6. Equipment Concealed:
☐ In a Motel Rm.
☐ In a Telephone
☐ In a Residence
☐ On a Person
☐ In a Vehicle
☐ Other (Specify) __Secured Network Room__

7. City & State where Equipment will be used: __Dayton, Ohio__
_____

8. The following mandatory requirements have been met:
☑ Consenting party has agreed to testify;
☑ Consenting party has executed a consent form; &
☑ Recording/transmitting device will be activated only when consenting party is present.

9. Government Attorney in judicial district where monitoring and/or recording will take place has been contacted; foresees no entrapment; & concurs in the use of the technique.
☑ Yes ☐ No Date of Contact: __8/17/98__

Identity of Gov't Atty: __AUSA__ [ ] b6
Judicial District: __Southern District of Ohio__ b7C

10. Violation(s): Title(s) __18__ Sec(s) __1030__ USC

11. DOJ notification required ☐ Yes ☑ No. If "Yes" check reason below:
NOTE: Requests for Routine NTCM usage involving any of the 7 sensitive circumstances requires a teletype to HQ prepared in the format described in the MIOG, Part II, Section 10-10.3 (8). Request for Emergency NTCM usage involving Item 6 below requires immediate contact with the FBIHQ substantive desk for DOJ approval. The 7 sensitive circumstances do not apply to the use of CCTV video only.

1. ☐ Interception relates to an investigation of a member of Congress; a Federal Judge; a member of the Executive Branch at Executive Level IV or above; or a person who has served in such capacity within the previous 2 years.
2. ☐ Interception relates to an investigation of any public official and the offense investigated is one involving bribery; conflict of interest; or extortion relating to the performance of his/her official duties.
3. ☐ Interception relates to an investigation of a Federal law enforcement official.
4. ☐ Consenting/nonconsenting party is a member of the diplomatic corps of a foreign country.
5. ☐ Consenting/nonconsenting party is or has been a member of the Witness Security Program and that fact is known to the agency involved or its officers.
6. ☐ **Consenting/nonconsenting party is in the custody of the Bureau of Prisons or the U.S. Marshals Service.**
7. ☐ Attorney General; Deputy Attorney General; Associate Attorney General; Assistant Attorney General for the Criminal Division; or the U.S. Attorney in the district where an investigation is being conducted has requested the investigating agency to obtain prior written consent for making a consensual interception in a specific investigation.

12. Synopsis of Case: (Attach additional page if necessary)

Please see attached.

13. Justification statement necessitating emergency authorization:
☐ Emergency 30 day authorization granted due to imminent need (within 48 hours) for use of consensual monitoring device(s), which precluded the handling of this request in the usual manner.
☐ Other (Attach Additional Page to Specify)

1-Government Attorney's Office

Attn: _____

COPY 4

Field Approval
14. CDC (If Sensitive Circumstances Exist)
Signature _____ Date: _____
15. SAC
Signature _____ Date: _____

FBIHQ Approval
16. Unit Chief (If Sensitive Circumstances Exist)
Signature _____ Date: _____